

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

x660

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishment Name				Telephone Number	Date of In (mm/dd/y	
Pints & union				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,1,1,1	18-329
Establishment Address (number and street, city, state, zip code)				502-314- 3627	4/4/2	814
	<i>arket</i>	St. Nur Albay, 12 4				
Owner			Purpose:	Follow-u	· :10 1	
Joe Phillips				1. Routine	No	10 days
Owner's Address				2. Follow-up	Summary	of Violations:
<u> </u>	-		3. Complaint	w		
Person in C	3 4 3 4		4. Pre-Operational	$\int c Q$	$_{\rm NC}$ 3 $_{\rm R}$	
Loe Thilips Responsible Person's E-mail				5. Temporary		
Responsible	e Person's	E-mail	6, HACCP	Menu Ty	pe (See back of page)	
0.45.15	176		7. Other (list)		✓	
Certified Food Manager Orange Cartified Food Manager (12/17/23)				7. Other (list)	12	3 X 4 5
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"						
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"						
Section#	C/NC	R	Narrative			To Be Corrected By
243	NC	March of Land		1. 1. 1. 1.		
- ''	744	Observed single - use i	Kins inappropriate	7 Stored in Viny	provid	/ Week
	ļ	upslairs closet				
		-sloff should t	ransition cases in	to office overflow	Horage	
351	NC	Observed so covere	d trash can in	domasteirs rest	room	1 Week
389	NC	Observed damp/so		1	· C discul	1 deal
	-			1-07/9	-1 0130	1
		2 1 []	(.)	1	٠	
		1 1 .	smoking /grilling	temporary even	۲)	
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Received by (name and title printed): Inspected by (name and title printed):						
		- · ·	A 1	_	(646)	
JOE PHILLIPS A.). Ingram (EHS)						
Received by (signature): Inspected by (signature):						
cc:		cc;			cc;	